

Site Development	
Permit Number: _	
_	-

SITE DEVELOPMENT PERMIT

Engineering Services Division Tel: (925) 973-2670 Fax: (925) 866-6173

Date:		Project Name:					
Assessor's Parcel Number:		Street	Street Address (x-street):				
above. All Specification	work shall be dor	ne in accor ion drawin	dance with the Cit	y of San Ramon Ned under the direc	improvements on the Municipal Code, Stand ction of and signed by approved by the City.	ard Plans and a registered Civil	
		T	EXHIBIT "A"	YES N	o		
		Nam		Addre	ss	Phone	
Owner							
Engineer							
Soils Engineer							
Landscape	Architect						
Contractor							
	Date of	Preconstru	uction Conference		,		
Date of Start Est. Date of Completion						_	
Approval	Construction Description		Estimated Cost	*Permit Fee %	Permit Fee Amount	Amount of Bond	
	Grading & Drair	nage					
	Parking Lot						
	Street Improver	nents					
	Landscaping						
	Off-Site Improve	ements					
	Total			1			
*Permit Fe	e includes plan ch	necking, in	spection and proce	essing.			
Comments	:						
Applicant _	Name			Address		Phone	
Applicant's Signature			Date				
Permit App	roved	O:4 F '					
		City Engin	eer (or authorized	representative)			
Date Construction Completed Date Bond Released							